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| Substitute for Form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i> | | | | Complete if Known | | |
| | | | | Application Number | 10/038,473 | |
| | | | | Filing Date | December 31, 2001 | |
| | | | | First Named Inventor: | Sushma S. Trivedi | |
| | | | | Art Unit | 2183 | |
| Examiner Name | Huisman, David J. | | | | | |
| Attorney Docket Number | 4860P2688 | | | | | |
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| Examiner Signature | /David Huisman/ | Date Considered | 10/01/2009 |
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